


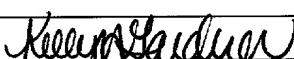
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| UTILITY PATENT APPLICATION TRANSMITTAL <small>Only for new nonprovisional applications under 37 C.F.R. § 1.53(b)</small> | Attorney Docket No. | A-7172 |
| | First Inventor or Application No | GAUL ET AL. |
| | Title | INTERACTIVE PROGRAM GUIDE CONFIGURATION SYSTEM |
| | Express Mail Label No. | EL874333197US |

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|---|---|----------|-------|--|--|---------|-------------------------|--|--|------|-------|----------|--|---------|-----------|-----|--|
| APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and duplicate for fee processing) 2. <input checked="" type="checkbox"/> Specification [Total Pages <u>35</u>] 3. <input checked="" type="checkbox"/> Drawings (35 U.S.C. § 113) [Total Sheets <u>31</u>] 4. Oath or Declaration [Total Pages <u>3</u>] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed) i. <input type="checkbox"/> DELETION OF INVENTORS Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b) 16. <input checked="" type="checkbox"/> If a CONTINUING APPLICATION , check appropriate box, and supply the information below and in a preliminary amendment <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input checked="" type="checkbox"/> Continuation-in-part (CIP) of prior application No: 09/693,115 AND 09/518,041 AND 09/590,925 Prior application information: Examiner: John Miller / Unassigned/Unassigned Group Art Unit. 2611 / 2711/2612 | ADDRESS TO: Box Patent Application Commissioner for Patents Washington DC 20231 5. <input type="checkbox"/> Microfiche Computer Program (Appendix) 6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (e.g. PTO/SB/17) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies ACCOMPANYING APPLICATION PARTS 7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee) 9. <input type="checkbox"/> English Translation Document (if applicable) 10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations 11. <input type="checkbox"/> Preliminary Amendment 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 13. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application, Statement(s) Status still proper and desired 14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 15. <input type="checkbox"/> Other: | | | | | | | | | | | | | | | | |
| 17. CORRESPONDENCE ADDRESS <input checked="" type="checkbox"/> Customer Number or Bar Code  or <input type="checkbox"/> Correspondence address below <table border="1"> <tr> <td>Name</td> <td colspan="3">05642</td> </tr> <tr> <td>Address</td> <td colspan="3">PATENT TRADEMARK OFFICE</td> </tr> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> <td></td> </tr> <tr> <td>Country</td> <td>Telephone</td> <td>Fax</td> <td></td> </tr> </table> | | Name | 05642 | | | Address | PATENT TRADEMARK OFFICE | | | City | State | Zip Code | | Country | Telephone | Fax | |
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| City | State | Zip Code | | | | | | | | | | | | | | | |
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| Name (Print/type) | KELLY A. GARDNER | Registration No (Attorney/Agent) | 35.147 |
| Signature |  | Date | AUGUST 7, 2001 |

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